

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

17 Mar 89 09/308478
APPLICANT(S) *Weber*

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2						
3						
4		3				
5		0				
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TOTAL IND.	1		1			
TOTAL DEP.		3				
TOTAL CLAIMS		3				

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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BEST AVAILABLE COPY